

## (AP19 Rec'd PCT/PTO 2 7 OCT 2009)

Attorney Docket No. <u>1019519-000506</u>

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Pa	atent Application of	MAIL STOP AMENDMENT					
Shunta	ro IBUKI	Group Art Unit: 1794					
Applica	tion No.: 10/571,990	) ) Examiner: Michael G. MILLER ) ) Confirmation No.: 5528					
Filing D	ate: March 15, 2006						
	OPTICAL FUNCTIONAL FILM, ANTIREFLECTION FILM, POLARIZING PLATE AND IMAGE DISPLAY DEVICE	) ) ) )					
	AMENDMENT/REPLY TRANSMITTAL LETTER						
P.O. Bo	Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450						
Sir:							
Enclose	Enclosed is a reply for the above-identified patent application.						
	A Petition for Extension of Time is enclosed.						
	Terminal Disclaimer(s) and the \$\sum \\$70 \$\sum \\$140 fee per Disclaimer due under 37 C.F.R. \\$ 1.20(d) are enclosed.						
	Also enclosed is/are:						
	Small entity status is hereby claimed.						
	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the \$\square\$ \$ 405 \$\square\$ \$810 fee due under 37 C.F.R. § 1.17(e).						
	Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.						
	Applicant(s) previously submittedcontinued examination is requested.	on for which					
_	Applicant(s) requests suspension of action by the Office until at least, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i is enclosed.  LLANDGRA 00000032 10571990						

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	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.
	No additional claim fee is required.
$\boxtimes$	An additional claim fee is required, and is calculated as shown below:

AMENDED CLAIMS						
	No. of Claims	Highest No. of Claims Previously Paid For	Extra Claims	Rate	Additi	onal Fee
Total Claims	29	26	3	x \$ 52 (1202)	\$	156
Independent Claims	4	4	0	x \$ 220 (1201)		0
☐ If Amendment adds multiple dependent claims, add \$ 390 (1203)					\$	0
Total Claim Amendment Fee					\$	156
☐ Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee						0
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT				\$	156	

	Charge to Deposit Account No. 02-4800 for the fee due.			
	A check in the amount of	is enclosed for the	ne fee due.	
$\boxtimes$	Charge \$156 to credit card for	the fee due. Form PTO-2038	is attached.	
$\boxtimes$	37 C.F.R. §§ 1.16, 1.17 and 1	zed to charge any appropriate .20(d) and 1.21 that may be re Deposit Account No. 02-4800.	quired by this paper, and	

Respectfully submitted,

BUCHANAN INGERSOLL & ROONEY PC

Date October 27,2009

By: Fang Liu, Ph.D.

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